UP-2 (5-97)

State of New Jersey
DIVISION OF TAXATION
PROPERTY ADMINISTRATION

UNCLAIMED PROPERTY REPORT - OWNER INFORMATION
(Omit all punctuation)

Page _____ of _____

For Period Ended
_____ 19____

_____
HOLDER

REC NO.

OWNER LAST NAME	FIRST NAME	M.I.	SUFFIX	OWNER ID/SS#	NO. OF OWNERS	OWNERSHIP TITLE

OWNER ADDRESS STREET 1	OWNER ADDRESS STREET 2	CITY	STATE	ZIP	COUNTRY (IF NOT U.S.)

PROPERTY CODE	PROPERTY ID NUMBER	DATE (MM DD YY)	CASH REPORTED $	SECURITIES REPORTED	TRANSFER METHOD	CUSIP #

OWNER CERTIFICATE ID NO.	DATED DATE OF REMITTED SECURITIES	DESCRIPTION OF PROPERTY / ISSUE NAME

CASH DIVIDEND(s)

From: To:

REC NO.

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